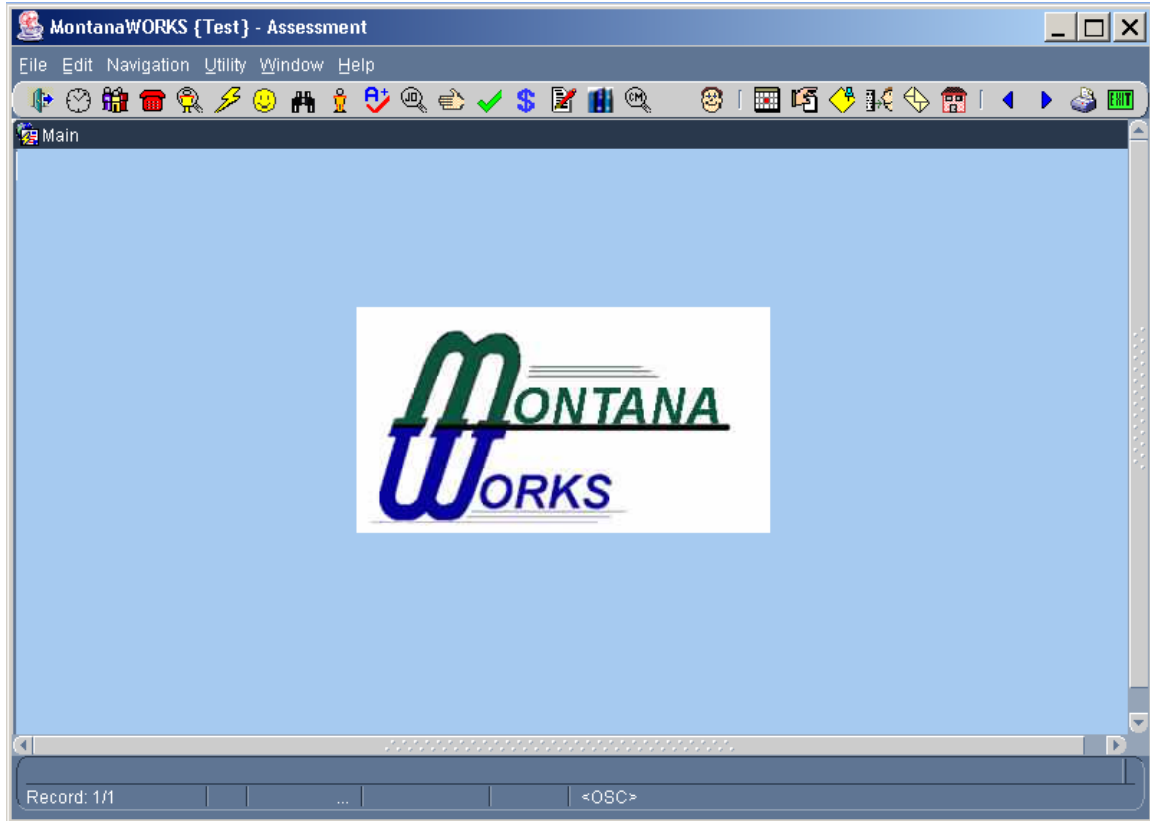


## **Assessment Screens**

**In this Section You Will**

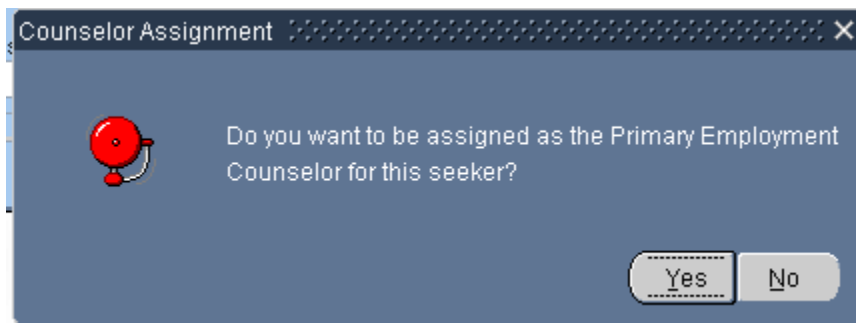
**Assess  
Employment, Education, Support Systems, Financial Needs and  
TABE Scores**

## Splash Screen



To navigate to the Assessment Screens, click on the  Assessment icon.

You may get the following screen. If you say No, you will be able to assign this seeker to another staff member in your office.



## Assessment Screen Employment Tab

MontanaWORKS {Test} - Assessment

File Edit Navigation Options Utility Window Help

Assessment - PHARAD WILSON(999-06-2846) | Joe Strelnik (406)494-0329

Employment Education Support System Financial Needs

Assessment Date: 07/02/07 Last Update Date:

Employment History

Employer	City	St

+ Add  
- Delete

Job Title:   
Start Date:  End Date:  Months:   
Per:  Salary:  Hrs. Wk.:   
Job Description:   
Reason For Leaving:

Job Keeping Skills

Were you able to get to work on time?   
Did you work most scheduled work hours?   
Describe your working relationship with your co-workers/supervisor   
What type of jobs have you liked in the past and what are you interested in?   
Describe what you liked most about your last job   
Describe what you liked least about your last job

Job Seeking Skills

Do you have a resume?   
What methods have you used for job search?  
☐ Online ☐ Newspaper ☐ Networking ☐ Direct  
☐ Cold Calling ☐ TV ☐ Radio ☐ Informational Interview  
☐ Employment Services  
Which methods worked best for you?

Describe your typical interview   
Do you need help preparing for interviews?

LMI vs. Potential Earnings:  **LMI**

Save Cancel

Name of customer's employer.   
Record: 1/1 <OSC>

In the “Employment History” section, the information that is displayed under the employer is for the highlighted employer (if there is more than one employer).

You can **+ Add** and **- Delete** employers as necessary.

Complete the information on the screen as it pertains to the seeker.

**LMI** This button takes you to the Research and Analysis Bureau’s website (if needed).

**SAVE** when you are done.

## Assessment Screen Education Tab

Assessment - SUSIE HOME MAKER(999-06-8266) | Carol Evanger (406)542-5763

Employment | **Education** | Support System | Financial Needs | Tests

Assessment Date: 09/26/07 Last Update Date: [blank]

Education History

Currently in School: Not [dropdown] Highest grade completed? High School... [dropdown]

Would you like to obtain your high school diploma or GED? [dropdown]

Do you have a learning disability? [dropdown]

What did you like about school? [text box]

What did you dislike about school? [text box]

Are there any training programs you started but didn't complete? [dropdown]

Training Program	Reason for Leaving	Exit Date
[text box]	[text box]	[text box]
[text box]	[text box]	[text box]

School: [text box] City: [text box] State: [text box] Major: [text box] Degree: None [dropdown] Completion Date: [text box]

Are you interested in more training/skills enhancement? [dropdown]

Describe: [text box]

Employment Skills

Employment Skills
[text box]
[text box]

Aptitude/Ability Tests

Test Type: [text box] Test Date: [text box] Results: [text box]

Education Issues

LEP: [text box] Describe: [text box]

Pell grant status: [dropdown] Describe: [text box] Financial Aid [button]

Licenses and Certificates

Training Completion Certificates

Type	License/Certificate	Date	St
[text box]	[text box]	[text box]	[text box]
[text box]	[text box]	[text box]	[text box]

Save Cancel

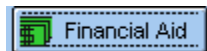
There is one REQUIRED field on this screen, **Pell Grant Status:**

The question, "Are there any training programs you started but didn't complete" has a section right below it to put in any program the participant did not complete.

The section below that starts with the field "School" is for schools the participant completed or is currently attending.

In the "Employment Skills" section, double click on the first row and a list of skills will be displayed for you to choose from.

In the "Aptitude/Ability Tests" this is where you put scores for tests such as CAPS, COPS AND COPES. This **NOT** where you put TABE scores!



This button takes you to the FAFSA (Free Application for Federal Student Aid).

Complete the areas that are appropriate to the seeker.

**SAVE** when you are done.

## Assessment Screen Support System Tab

MontanaWORKS [Test] - Assessment

File Edit Navigation Options Utility Window Help

Assessment - PHARA D WILSON(999-06-2846) | Joe Strelnik (406)494-0329

Employment Education **Support System** Financial Needs

Assessment Date: 07/02/07 Last Update Date: 07/02/07

**Childcare**  
 Seeker Pregnant: No Due Date:   
 Household include children: No Child Care Start Date   
 Need child care supportive services to participate in employment activity:   
 Describe:   
 Do you have a childcare provider?   
 What is your backup plan if provider is not available?   
 Additional Support   
 Any additional supports you need to be successful in employment/participation? Will need help with tuition and

**Transportation**  
 What is your transportation? I have a car.   
 What is your backup plan if primary transport is unavailable? Spouse's Car   
 Drivers License State: MT Class: Standard Endorsements: M Status:   
 Print Add Delete

**Support Contacts**

Support Name	Number	Relationship	Type
Lonnie Wilson	(406)444-4444	spouse	1st Contact
Erika Wilson	(406)428-9635	Sister in Law	2nd Contact

Print Add Delete

**Housing**  
 Homeless in the last year: No   
 Describe:   
 Current Situation: Mortgage   
 Expect any changes in 90 days: No   
 Describe:   
 Save Cancel

**Household Members**

First	Mi.	Last	Birthday	Age	Gender	Relation	Dep
Phara	D	Wilson	10/25/1969	37	Fe...	Primary	N
Lonnie	X	Wilson	09/01/1965	41	Male	Spouse	N

Add Delete

Transaction complete: 7 records applied and saved.  
 Record: 1/1 <OSC>

The "Support Contacts" section is where you will put your 1<sup>st</sup> and 2<sup>nd</sup> contact for Customer Satisfaction Surveys. You can also use this information in case you cannot locate the participant.

**Support Contacts**

Support Name	Number	Relationship	Type
Lonnie Wilson	(406)444-4444	spouse	1st Contact
Erika Wilson	(406)428-9635	Sister in Law	2nd Contact



Print Add Delete

These fields are free form fields and anything can be typed into each field.

The Print button will print the Support Contacts for you.

The "Household Members" section is where the system will pull the information about the children when you have supportive services for childcare.

First	Mi.	Last	Birthday	Age	Gender	Relation	Dep
Phara	D	Wilson	10/25/1969	37	Fe...	Primary	N
Lonnie	X	Wilson	09/01/1965	41	Male	Spouse	N

 Add  Delete

Put in the seeker as "Primary" in the Relationship field!

In this section, the "Relationship" field is not free form. You must choose from a drop down list.

Complete the fields that are appropriate for the seeker. **SAVE** when you are done.

## Assessment Screen

### Financial Needs Tab

MontanaWORKS {Test} - Assessment

File Edit Navigation Options Utility Window Help

Assessment - PHARA D WILSON(999-06-2846) | Joe Strelnik (406)494-0329

Employment Education Support System Financial Needs

Assessment Date: 07/02/07 Last Update Date:

Assessment Month & Year: 07/02/07

Comment:

Copy Add Delete

Assessment Month Net Difference: 0  
(Total Resources minus Expenditures):

Monthly Household Resources

Resource Type	Description	Amount

Total Monthly Resources:

+ Add - Delete

Monthly Household Expenditure

Expenditure Type	Description	Amount

Total Monthly Expenditures:

+ Add - Delete

Print Save Cancel

Assessment Date:

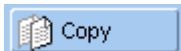
Record: 1/1


<OSC>

This is an optional screen that will help you determine if the participant is going to need supportive services household expenses while they are participating in WIA.

You can come back to this screen at any point when serving the participant and complete this screen, or add to it etc.

In the “Resources Type” and “Expenditure Type” fields, you double click on them and a list of items to choose from will be displayed.



 Use this button to copy one month to the next. A box will appear asking for the month to copy to. This will save time when you are doing this several months in a row.

**SAVE** when you are done.

## Assessment Screen

### Tests Tab

File Edit Navigation Options Utility Window Help

Assessment - SUSIE HOMEMAKER(999-06-8266) | Carol Evanger (406)542-5763

Employment Education Support System Financial Needs Tests

Math Type	Test Date	Test Name	Case Manager	Location	Level	Score	Grade Equiv
PRE	09/26/07	TABE	Carol Evanger	Missoula Workforce Center Job Service	Difficult	514-561	6.0-8.9

+ Add - Delete

Reading Type	Test Date	Test Name	Case Manager	Location	Level	Score	Grade Equiv
PRE	09/26/07	TABE	Carol Evanger	Missoula Workforce Center Job Service	Difficult	514-561	6.0-8.9


+ Add - Delete

Limited English Proficiency Type	Test Date	Test Name	Case Manager	Location	Education Level/Test Score

+ Add - Delete

Save Cancel

Enter the TABE test scores on this screen.

Click on the  button to add a new score. Notice the sections for Math, Reading, and Limited English Proficiency.